MULTIPLE DEPENDENT CLAIM SERIAL NO. FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) APPLICANT(S) CLAIMS AFTER AFTER AS FILED AFTER **AS FILED** AFTER I AMENDMENT 1 MAMENDMENT CAMENDMENT. 3 MAMENDMENT. IND. DEP. IND. | DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. 73 26 79 80 39. 91 92 <u>-43</u> 9.6 9.7 TOTALIND TOTAL IND TOTAL DEP TOTAL DEP TOTAL TOTAL CLAIMS CLAIMS U.S. DEPARTMENT of COMMERCE PAIL YAR (REV. 1104) Pascal and Tradentark Office Charitte Burt

CT AVAILABLE CODY